

Contact Food Stamp Program

Business Hours

8:00 A.M. – 4:30 P.M., Monday through Friday
8:00 A.M - 4:00 P.M (District Office Lobby Hours)

Telephone Numbers

Telephone	(603) 271-9700
Toll Free Number	(800) 852-3345, ext. 9700
TDD Access Relay	(800) 735-2964
Fax Number	(603) 271-4230
Client Services	(603) 271-9700
Client Services Toll Free	(800) 852-3345, ext. 9700
EBT Electronic Benefit Client Questions	(888) 997-9777 (24 Hours)
EBT Retail Help Line	(800) 831-5235 (24 Hours)
EBT Retailer General Questions	(800) 350-8533 (8-5 M-F)
FNS Food Nutrition Merchant Applications	(877) 823-4369 (8-7 M-F)
FNS Merchant Questions	(603) 225-5253 (8:30-5 M-F)
Requests for Proposals Information	(603) 271-9474

E-Mail

Send e-mail (<http://apps.dhhs.nh.gov/EmailContact/EmailContact.aspx?a=foodstamps&b=Food%20Stamp%20Program>) to the Food Stamp Program

Address

Street Address	129 Pleasant Street Concord, NH 03301
Mailing Address	Food Stamp Program Division of Family Assistance NH Department of Health & Human Services 129 Pleasant Street Concord, NH 03301

Directions

DFA PROGRAM NET* MONTHLY INCOME LIMITS

***Note:** You must give us your gross income. Each program may have certain “disregards” and “deductions” that are allowed. We subtract these disregards and deductions from your gross income to come up with a program-specific figure that we call your “net” income. Your “net” income is then compared against the income limits below. You can also go to <https://nheasy.nh.gov/> for a quick and easy way to see if you might be eligible.

CASH PROGRAMS AND EMERGENCY ASSISTANCE

Family Size	FANF Max. Income (Limit is lower for those with shelter expenses of less than \$368)	OAA, APTD, ANB in an Independent living arrangement	OAA, APTD, ANB in a Residential Care Facility	OAA, APTD, ANB in a Community Residence
1	\$539	\$735	\$915 Eligibility is always determined individually	\$797 (subsidized) \$8857 (unsubsidized) \$915 (enhanced family care) Eligibility is always determined individually
2	\$606	\$1,083		
3	\$675	\$1,431*		
4	\$738	*A three person group applies if there is a needy essential person and a couple in the home		
5	\$798			
6	\$879			

MEDICAID

AG	Medically Needy & In and Out MA	Parent/Caretaker Relative	Children’s Medicaid (CM), Children with Severe Disabilities (CSD), Pregnant Women MA, Family Planning MA ≤196%	Expanded (CM) >196%, but ≤318%	MEAD (Premium Program)
1	\$591	\$670	\$1,907	\$1,907 - \$3,093	\$4,377
2	\$675	\$816	\$2,570	\$2,570 - \$4,169	\$5,899
3	\$683	\$965	\$3,233	\$3,233 - \$5,245	
4	\$691	\$1,108	\$3,896	\$3,896 - \$6,321	
5	\$698	\$1,247	\$4,559	\$4,559 - \$7,397	
6	\$779	\$1,408	\$5,222	\$5,222 - \$8,473	
7	\$842	\$1,551	\$5,885	\$5,885 - \$9,548	
8	\$935	\$1,723	\$6,549	\$6,549 - \$10,624	

MEDICARE SAVINGS PROGRAMS (MSP)

Family Size	QMB ≤100%	SLMB >100% but ≤135%	QDWI ≤200%
1	\$973	\$973 - \$1,313	\$1,945
2	\$1,311	\$1,311 - \$1,770	\$2,622
3	\$1,650	\$1,650 - \$2,227	\$3,299
4	\$1,988	\$1,988 - \$2,684	\$3,975

FOOD STAMPS

Family Size	Gross Income Limits for Households with no Members who are Disabled or Age 60 or Older (130%)**	Net Income Limits for All Households (100%)**
1	\$1,245	\$958
2	\$1,681	\$1,293
3	\$2,116	\$1,628
4	\$2,552	\$1,963
5	\$2,987	\$2,298
6	\$3,423	\$2,633
7	\$3,858	\$2,968
8	\$4,294	\$3,303

**Gross and net income limits do not apply to households in which all members receive DFA cash benefits and/or SSI.